

**United States District Court**  
**Violation Notice**

CVB Location Code

**MT-40**

Violation Number <b>6512133</b>	Officer Name (Print) <b>G. Brown</b>	Officer No. <b>548</b>	<b>6512133</b>
Date and Time of Offense (mm/dd/yyyy) <b>11/05/2019 11:00</b>	Offense Charged <input checked="" type="checkbox"/> CFR <input type="checkbox"/> USC <input type="checkbox"/> State Code <b>41CFR 102-74.380</b>		
Place of Offense <b>10201 West 7 Mile Rd</b>			

Offense Description: Factual Basis for Charge <b>Disorderly Conduct</b>	HAZMAT <input type="checkbox"/>
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<b>DEFENDANT INFORMATION</b>		Phone: ( ) -			
Last Name <b>Berry</b>	First Name <b>Lawrence</b>	M.I. <b>L</b>			
Street Address <b>18625 North Lawnd</b>					
City <b>Detroit</b>	State <b>MI</b>	Zip Code <b>48221</b>	Date of Birth (mm/dd/yyyy) <b>09/03/1969</b>		
Drivers License No. <b>B600488237686</b>	CDL <input type="checkbox"/>	D.L. State <b>MI</b>	Social Security No. <b>386-94-2654</b>		
<input type="checkbox"/> Adult <input type="checkbox"/> Juvenile	Sex <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Hair	Eyes	Height	Weight
<b>VEHICLE</b>	VIN:				
CMV <input type="checkbox"/>					

Tag No.	State	Year	Make/Model	PASS <input type="checkbox"/>	Color
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CVB SCAN 12/16/2019 14:12

A  IF BOX A IS CHECKED, YOU MUST APPEAR IN COURT. SEE INSTRUCTIONS (on back of yellow copy).

B  IF BOX B IS CHECKED, YOU MUST PAY AMOUNT INDICATED BELOW OR APPEAR IN COURT. SEE INSTRUCTIONS (on back of yellow copy).

\$ **250<sup>00</sup>** Forfeiture Amount  
+ \$30 Processing Fee

\$ **280<sup>00</sup>** Total Collateral Due

**YOUR COURT DATE**

(If no court appearance date is shown, you will be notified of your appearance date by mail.)

Court Address	Date (mm/dd/yyyy)
	Time (hh:mm)

My signature signifies that I have received a copy of this violation notice. It is not an admission of guilt. I promise to appear for the hearing at the time and place instructed or pay the total collateral due.

X Defendant Signature \_\_\_\_\_